Submission Guidelines for 1.5.14.3 Crisis Stabilization Units Process and Plan

(½ of 1% of the SGFs Allocated per Contract for Crisis Stabilization Services)

General Guidelines:

<u>Please Note</u>: As a point of clarification, we intended to ask for a written process for "screening" and not a comprehensive assessment.

All crisis stabilization programs should have a written process for referral, assessment (**screening**), and admission to crisis stabilization services. Existing documents, including relevant policies and procedures, can be used in responding to the requirements of this performance measure (submission #1).

The future corresponding crisis stabilization access improvement plan (submission #2) should address any identified tasks that could potentially improve access to services by individuals with co-occurring disorders. This plan should be unique to each region and may include activities such as staff training, diverse staff recruitment, identification of screening tools, etc. This plan should address current status and proposed status using measurable objectives.

Current Status of Referral, Assessment, & Admission, Submission #1 Report Format for Submission #1 (due September 1, 2005):

- 1. Please describe your process for
 - Referral
 - Assessment
 - Admission

for clients presenting for crisis services (OR submit hard copies of each).

2. What accommodations do you make within your referral, assessment and admission process to insure access for individuals with co-occurring disorders? (e.g. specific screening tools, interpreters, additional staffing, etc.) Co-occurring disorders includes individuals with mental illness and substance abuse, mental retardation and/or brain injury.

Future Plan for Access Improvement Initiatives, Submission #2 Report Format for Submission #2 (due October 31, 2005):

- Please describe <u>specific</u> initiatives designed to improve access to persons with cooccurring disorders within your program (e.g. service protocols, cross-training, staff deployment patterns, etc.).
- 2. How do you plan to measure (both quantitatively and qualitatively) improvement in access to crisis stabilization services by individuals with co-occurring disorders?

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